

ALABAMA UNIFORM TRAFFIC ACCIDENT REPORT

UPS
Accident No.

Shaded Areas To Be Used By Data Processing Only

Sheet of Sheet(s) Microfilm No. Local Case No.

LOCATION AND TIME	Date			Time	AM PM MT	Day of Week	M T W T H F S S	County	City	Rural		Highway Classification:	I - Interstate F - Federal	S - State C - County	M - Municipal P - Private Prop. O - Other	Local Zone			
	Month	Day	Year	On Street, Road or Highway	At Intersection of or Between (Node 1)			And (Node 2)			01 - Overturned 02 - Fire/Explosion 03 - Immersion 04 - Gas Inhalation			NONCOLLISION EVENT 05 - Spill 06 - Road/Bridge Collapsed 07 - Jackknifed			08 - Parts/Cargo Fell From Moving Vehicle 09 - Trailer Hitch Came Loose 12 - Other		
	Street or Road Code			1 2 Node Code			Feet From Node 1 or 2 (Circle One)			15 - Pedestrians 20 - Non-parked Vehicle 30 - Parked Vehicle 35 - Train 40 - Pedal Cyclist 45 - Animal 51 - Guardrail 52 - Crash Cushion 53 - Utility Pole 54 - Non-breakaway Light 55 - Tree 56 - Fire Hydrant 57 - Pier or Column 59 - Non-breakaway Sign			COLLISION EVENT 61 - Mailbox(es) 62 - Gas Line 63 - Barricade 64 - Bridge Rail 65 - Culvert Headrail 66 - Curbing 67 - Retaining Wall 68 - Median Barrier 69 - Sideslope 71 - Building 72 - Fence 73 - Boulder 74 - Ditch			75 - Overpass/Underpass 76 - Other Fixed Object 77 - Breakaway Sign 78 - Manhole 79 - Telephone Booth 80 - Guy Wire 81 - Breakaway Light 82 - Overhead Object 84 - Bridge Abutment 87 - Animal with Rider 90 - Foreign Material in Road 93 - Pothole 97 - None 98 - Other			
	Intersection Related 1 - Node 1 2 - Node 2 N - Not Int. Related		Mile Post		Control Access Hwy Loc		1 - Main Rd 2 - Frontage Rd		3 - Interchange 4 - Entrance Ramp		5 - Exit Ramp 6 - N/A		Prime Contr Circms Unit No		Prime Contr Unit No				
	First Harmful Event		Event Location		Distance to Fixed Object		No. of Vehicles		No. Pedestrians		No. Injured		No. Fatalities		Unit 1 Type		Unit 2 Type		

UNIT NO LEFT SCENE COM VEH UNIT 1	DRIVER	Driver Full Name		Street Address				City and State				ZIP		Telephone No															
		DOB		Race		Sex		DL State		Driver License No.		DL Class		DL Status		List Restrictions Not Complied With		CDL Status		List Endorsements Not Complied With		Residence Less Than 25 Miles Yes No							
		Month		Day		Year		Place of Employment		Liability Insurance Co.				Social Security No.															
		Driver Condition:		1 - No Defect 2 - Apparently Asleep		3 - Fatigued 4 - Ill		8 - Other 9 - Unknown		Sobriety		Officer's Opinion:		Alcohol: Drugs:		Yes No Unk		Type Test Given:		9 - No Test		1 - Blood Test 2 - Breath Test		3 - Urine Test 4 - Unable to Administer		5 - Refused Test		Test Results	
		Maneuver		Travel Road Name				Road Code		Travel Direction N E S W A-Not on Rd U-Unk		Other Contr Circumstance.		Prime Harm Event		Event Loc													

VEHICLE	Veh Year		Make		Model		Body		V.I.N.		License Tag Number		State		Year					
	Owner's Name				Street or R. F. D.				City				State		ZIP					
	Type		Usage		Hazardous Cargo		Attachment		Contributing Defect		Circle areas Damaged On Diagram									
	1 - Auto 2 - StaWagon 3 - Pick Up 4 - Van 5 - Truck Tractor 6 - Other Truck 7 - Comm. Bus 8 - School Bus 9 - Other Bus 10 - Motorcycle		11 - Moped 12 - M. Scooter 13 - Pedal Cycle 14 - Farm Mach. 15 - Train 16 - Road Equip. 17 - Ridden Animal 18 - M. Home (R.V.) 19 - ATV 98 - Other		1 - Personal 2 - Driver Trng. 3 - Construction 4 - Ambulance/ Paramedical 5 - Military 6 - Taxi 7 - Transport Prop. 8 - Agriculture 9 - Wrecker/Tow		10 - Police 11 - Other Business 12 - Bus/Pass. Transport. 13 - Fire Fighting 98 - Other		1 - None 2 - Explosive 3 - Gas 4 - Flam/Combust Liq. 5 - Flammable Solids 6 - Oxidizer/Peroxide 7 - Poison 8 - Radioactive Matl. 9 - Corrosive Material 98 - Other		1 - None 2 - Mobile Home 3 - Semi Trailer 4 - Utility Trailer 5 - 4-Wheel Trailer 6 - Boat Trailer		7 - Camper Trailer 8 - Towed Vehicle 9 - Tanker 10 - Pole Trailer 11 - Double Trailer 98 - Other		97 - None 1 - Brakes 2 - Steering 3 - Power Plant 4 - Suspension 5 - Tires 6 - Exhaust 7 - Lights 8 - Turn Signal		9 - Windows/ W. Shield 10 - Restraint Sys. 11 - Wheels 12 - Truck Coupling 13 - Cargo 14 - Fuel System 98 - Other 99 - Unknown		10 - Under Carriage 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 95 - N/A 11 - Attachment	
	Speed Limit MPH		Est. Speed MPH		Citation Offense Charged		Damage Severity		1 - None Visible 2 - Not Disabled		3 - Disabled		Vehicle Towed Away? Yes No		Occupants in Unit		Total Injuries in Unit			

Vehicle Towed By Whom:		To Where:		Enter Point of Initial Impact	
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UNIT NO LEFT SCENE COM VEH OR PEDESTRIAN VEHICLE	DRIVER	Driver / Pedestrian Full Name		Street Address				City and State				ZIP		Telephone No															
		DOB		Race		Sex		DL State		Driver License No.		DL Class		DL Status		List Restrictions Not Complied With		CDL Status		List Endorsements Not Complied With		Residence Less Than 25 Miles Yes No							
		Month		Day		Year		Place of Employment		Liability Insurance Co.				Social Security No.															
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Vehicle Towed By Whom:		To Where:		Enter Point of Initial Impact	
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C O D E S	Contributing Circumstances		Driver Maneuver		Pedestrian Action		Event Loc									
	01 - Improper Passing 02 - Improper Lane Change/Usage 03 - Improper Turn/U-Turn 04 - Following Too Close 05 - Misjudge Stopping Dist 06 - Over Speed Limit 07 - Avoid Object/Person/Veh 08 - Unseen Object/Person/Veh 09 - Improper Backing 10 - Inop Traffic Control 11 - Improper/No Signal 12 - Fail to Heed Sign/Signal		13 - Improper Driving-Environ 14 - Road Defect 15 - Vision Obstruction 16 - Defective Equipment 17 - DUI 18 - Under Min Speed 19 - Improper Load/Size 20 - Improper Attachment 21 - Fail to Yield Right-of-Way 22 - Driver Condition 23 - Wrong Side of Road 24 - Veh Pushed/Towed by Veh		25 - Veh Pushed by Person 26 - Veh Left Road 27 - Driver Not in Control 28 - Load Shift 29 - Parts/Cargo from Veh 30 - Ped Violation 31 - Veh Wgt/Hgt/Lngth 32 - Ped Under Influence 33 - Illegal/Improper Parking 97 - None 98 - Other 99 - Unknown		01 - Go Straight Ahead 02 - Pass on Left 03 - Pass on 1-Way Street 04 - Pass on Right 05 - Go Straight - Left Turn Lane 06 - Go Straight - Right Turn Lane 07 - Change Lanes - Left 08 - Change Lanes - Right 09 - Merge - Left 10 - Merge - Right 11 - Wrong Side of Road 12 - Wrong Way - 1-Way		13 - Right Turn 14 - Left Turn 15 - U-Turn 16 - Start from Park 17 - Start in Traffic 18 - Slowing/Stopping 19 - Stopped in Traffic 20 - Avoid Object in Road 21 - Exiting Private Road/Property 60 - Ped/Cyc Ride with Traffic in Road 61 - Ped/Cyc Ride with Traffic off Road 62 - Ped/Cyc Ride Against Traffic in Rd		63 - Ped/Cyc Ride Against Traffic off Rd 64 - Ped/Cyc Ride Across Bike 65 - Ped/Cyc Ride in Bike Path 70 - Enter Parked Position 71 - Parked - Legally 72 - Parked - Illegally 81 - Backing 86 - Pushed By Vehicle 87 - Pushed By Pedestrian 99 - Unknown		01 - Cross/Enter - Intersection 02 - Cross/Enter - Other 03 - Walk in Road - With Traffic 04 - Walk in Road - Against Traffic 05 - Stand in Roadway 06 - Get on/off Vehicle 07 - Push/Work on Vehicle 08 - In-Road - Other Work 09 - In-Road - Playing 10 - In-Road - Other 11 - Not in Road 98 - Other 99 - Unknown		1 - On Roadway 2 - Off Roadway 3 - Median 4 - Driveway 5 - Private Road/Property 6 - In Intersection	

SEATING	<div><div><div>Unit 1</div><div><div>123</div><div>456</div><div>789</div></div><div>10</div><div>11</div></div><div>Other Involved Unit (Circle One) 12 - Pedestrian 13 - Rider of Domestic Animal 14 - Occ. of Non-Motorized Vehicle 15 - Victim of Other Circumstance/ Codes Not Applicable Other Involved Safety Equipment</div></div>										<div><div><div>Unit 2</div><div><div>123</div><div>456</div><div>789</div></div><div>10</div><div>11</div></div><div>Other Involved Unit (Circle One) 12 - Pedestrian 13 - Rider of Domestic Animal 14 - Occ. of Non-Motorized Vehicle 15 - Victim of Other Circumstance/ Codes Not Applicable Other Involved Safety Equipment</div></div>										CODES																		
	VICTIMS										Unit No	Seat Pos	Injury Type	Age	Sex	Ejec-tion	First Aid By																						
Name										Address																													
Taken To										Taken By																													
Name										Address																													
Taken To										Taken By																													
CODES	Injury Type					Ejected					First Aid By																												
	K - Killed B - Bruise/Abrasion/Swelling A - Visible or Carried from Scene C - Not Visible-Has Pain/Faint					N - Not F - Fully P - Partially T - Trapped U - Unknown A - Not Applicable					A - Ambulance Attended D - Doctor M - Paramedic O - Other P - Police U - Unknown N - None																												
NARRATIVE AND DIAGRAM																																							
	Officer's Opinion of What Happened:																																						
ROADWAY ENVIRONMENT	For Each Roadway Environment Field, Circle One Entry for Each Involved Unit:																																						
	Unit 1		Contributing Road Defects		Surface Construction		Condition		Accident In Or Related To Road Construction Zone?		Material In Roadway (Contributing)				Material Source				Character																				
	Unit 2		4 4 - None 1 1 - Shoulders Low 2 2 - Shoulders High 3 3 - Holes, Bumps, Etc. 8 8 - Other		1 1 - Asphalt 2 2 - Concrete 3 3 - Brick 4 4 - Unpaved 8 8 - Other		1 1 - Dry 2 2 - Wet 3 3 - Icy 4 4 - Snowy/Slushy 5 5 - Muddy 8 8 - Other		Yes Yes No No		1 1 - None 2 2 - Rocks 3 3 - Trees/Limbs 4 4 - Dirt 5 5 - Gravel 6 6 - Oil/Petrol 8 8 - Other				1 1 - Not Applicable 2 2 - Natural Environment 3 3 - Dropped From Vehicle 4 4 - Already in Road, But Fell From Vehicle 8 8 - Other 9 9 - Unknown				1 1 - Straight-Level 2 2 - Straight-Down Grade 3 3 - Straight-Up Grade 4 4 - Straight-Hillcrest 5 5 - Curve-Level 6 6 - Curve-Down Grade 7 7 - Curve-Up Grade 8 8 - Curve-Hillcrest																				
	Vision Obscured By:										Traffic Control										Opposing Lanes Separated By:				Trafficway Lanes														
	97 97 - Not Obscured 1 1 - Buildings 2 2 - Signboard 3 3 - Trees, Crops, Bushes 4 4 - Blowing Snow/Sand 5 5 - Hillcrest 6 6 - Curve in Road 7 7 - Fog 8 8 - Parked Vehicle 9 9 - Moving Vehicle(s)										10 10 - Blinded by Sunlight 11 11 - Fire/Smoke 12 12 - Dust 13 13 - Blinded by Headlights 14 14 - Embankment 15 15 - Rain on Windshield 16 16 - Snow on Windshield 98 98 - Other 99 99 - Unknown										1 1 - Police Officer 2 2 - R.R. Crossing Gates 3 3 - R.R. Flashing Lights 4 4 - R.R. Cross Bucks/Pave. Mark 5 5 - Pedestrian Control 6 6 - Traffic Signal 7 7 - Flashing Beacon 8 8 - Stop Sign 9 9 - Yield Sign 10 10 - Lane Control Device										11 11 - Flagger 12 12 - No Passing Zone 97 97 - None 98 98 - Other				97 97 - None 1 1 - Paved Surface 2 2 - Unpaved Surface 3 3 - Broken Painted Line 4 4 - Solid Painted Line 5 5 - Concrete Barrier 6 6 - Metal Guard Rail 7 7 - Fence 98 98 - Other Barrier				1 1 - One Lane 2 2 - Two Lanes 3 3 - Three Lanes 4 4 - Four Lanes 5 5 - Five Lanes 6 6 - Six Lanes or More
																								One-Way Street															
INVESTIGATION	Light		Weather		Locale		Non-Vehicular Property Damage		Property Damage Description																														
	1 - Daylight 2 - Dawn 3 - Dusk		4 - Darkness-Road Not Lit 5 - Darkness-Road Lit		1 - Clear 2 - Cloudy 3 - Rain 4 - Snow		5 - Sleet/Hail 6 - Crosswind 7 - Fog 8 - Other		1 - Open Country 2 - Residential 3 - Shop/g or Business 4 - Mfg. or Industrial		5 - School 6 - Playground 8 - Other		1 - None Visible 2 - Light		3 - Moderate 4 - Severe		Description: Owner: Address:																						
	Time Police Notified		AM PM MT		Time Police Arrived		AM PM MT		Time EMS Arrived		AM PM MT		Name of Photographer																										
	Witness Full Name										Address										Telephone																		
	Witness Full Name										Address										Telephone																		
	Name of Investigating Officer										Officer 10										Agency ORI										Supervisor Reviewed								
	Name of Other Investigating Officer(s) at Scene										Officer 10										Agency ORI																		
The data on this report reflects my best knowledge, opinion and belief covering the accident, but no warrant is made as to the factual accuracy thereof.																																							
Signature of Investigating Officer															Date																								